Test Type: Long-Term

Route: Dosed-Feed

Species/Strain: Mouse/B6C3F1

## P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

**C Number:** C53792

Cage Range: All

Date Range: All

Reasons For Removal: All

Removal Date Range: All

Treatment Groups: All

Study Gender: Female

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_001	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Liver	Hepatocytes	Necrosis, Focal		
Lung		Perivasculitis		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_002	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Blood vessel	Coronary Artery Nos	Inflammation, Acute/Chronic		
Heart		Perivasculitis		
Lung		Pneumonia, Interstitial Chronic		
Pancreas	Acinus	Atrophy, Focal		
		Cyst, Multiple		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Time Report Requested: 14:00:31

Date Report Requested: 10/26/2014

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_003	<b>TRT#:</b> 1	SEX: Female	DAY ON TEST:
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:
OBSERVATIONS			
Brain	Hypothalamus Nos	Atrophy, Pressure	
Mammary gland		Hyperplasia, Cystic	
Pituitary gland		Chromophobe Adenoma	
Skin		Inflammation, Granulomatous Focal	
Thyroid		Hyperplasia, Follicular Cell	
Unspecified	Multiple Organs Nos	Lymphoma, Mixed-Malignant Type	
Uterus	Endometrial Gland	Cyst, Multiple	
PRIMARY CAUSE OF DEATH	-		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1\_004 TRT#: 1 SEX: Female DAY ON TEST:

DOSE: 2000 PPM DISP: Scheduled Sacrifice HISTO:

OBSERVATIONS

Uterus Endometrial Gland Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_005	TRT#: 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Adrenal gland	Zona Fasciculata	Focal Cellular Change		
Lung		Alveolar/Bronchiolar Adenoma		
		Histiocytosis		
		Perivasculitis		
Lymph node	Mandibular Lymph Node	Hyperplasia, Lymphoid		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
		Leiomyosarcoma		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_006	TRT#: 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	DISP: Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Kidney		Lymphocytic Inflammatory Infiltrate		
Spleen		Hyperplasia, Lymphoid		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_007	TRT#: 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Lymph node		Hyperplasia, Lymphoid		
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
	Endometrium	Hyperplasia, Stromal		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_008	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lymph node		Lymphoma, Mixed-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

o. 9

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_009	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Pancreas	Duct Nos	Cyst, Multiple		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	_			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_010	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
ORCERVATIONS	2 0 0 2 1 2 3 3 3 1 1 1 1 1			
OBSERVATIONS				
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_011	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Natural Death	DAY ON TEST: HISTO:	
OBSERVATIONS				
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_012	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Moribund Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Lymph node	Mesenteric Lymph Node	Necrosis, Diffuse		
Peritoneum		Inflammation, Acute Fibrinous		
Thymus		Necrosis, Nos		
Unspecified	Back	Inflammation, Acute/Chronic		
Uterus		Inflammation, Acute/Chronic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Time Report Requested: 14:00:31

Date Report Requested: 10/26/2014

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 1\_013 **TRT#:** 1

DOSE: 2000 PPM

**SEX:** Female

DISP: Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Uterus Endometrial Gland

Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

ANIMAL ID: 1_014	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Natural Death	DAY ON TEST: HISTO:
OBSERVATIONS			
Ovary		Cyst, Follicular Nos	
Peritoneum		Inflammation, Acute/Chronic	
Spleen		Hematopoiesis	
Unspecified	Abdominal Wall Nos	Abscess, Chronic	

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F	l
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ANIMAL ID: 1_015	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Eye	Lacrimal Gland	Adenoma, Nos		
	Lacrimal Gland	Inflammation, Chronic Focal		
Liver		Hepatocellular Adenoma		
Lung		Hemosiderosis		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 1\_016 **TRT#**: 1 DOSE: 2000 PPM **SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

**OBSERVATIONS** 

Hyperplasia, Lymphoid Kidney Hyperplasia, Lymphoid Spleen Uterus **Endometrial Gland** Hyperplasia, Cystic

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID</b> : 1_017	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Natural Death	DAY ON TEST: HISTO:
OBSERVATIONS			
Adrenal gland		Inflammation, Acute Diffuse	
Liver		Inflammation, Acute Focal	
Ovary		Cyst, Follicular Nos	
Pancreas		Lymphoma, Histiocytic-Malignant Type	
Spleen		Inflammation, Acute Diffuse	
Uterus	Endometrial Gland	Hyperplasia, Cystic	
PRIMARY CAUSE OF DEATH	-		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**Test Type:** Long-Term **Route:** Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_018	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Kidney	Tubule	Inflammation, Chronic Focal		
	Cortex	Metaplasia, Osseous		
Spleen		Hemangioma		
Thyroid		Hyperplasia, Follicular Cell		
Uterus		Hemangiosarcoma		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_019	<b>TRT#:</b> 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Gall bladder		Inflammation, Chronic		
Lymph node	Mesenteric Lymph Node	Angiectasis		
Ovary		Granulosa-Cell Tumor		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

**Test Type:** Long-Term **Route:** Dosed-Feed

**ANIMAL ID:** 1\_020

Species/Strain: Mouse/B6C3F1

TRT#: 1
DOSE: 2000 PPM

**SEX:** Female

**DISP:** Scheduled Sacrifice

DAY ON TEST:

HISTO:

OBSERVATIONS

Brain Meninges Lymphocytic Inflammatory Infiltrate
Uterus Endometrial Gland Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_021	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Adrenal gland		Pheochromocytoma		
Brain	Meninges	Lymphocytic Inflammatory Infiltrate		
Ovary		Cyst, Hemorrhagic		
Thyroid		Inflammation, Acute/Chronic		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_022	TRT#: 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Natural Death	HISTO:	
OBSERVATIONS				
Liver		Necrosis, Focal		
Mammary gland		Adenocarcinoma, Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

**TRT#:** 1 **ANIMAL ID:** 1\_024 DOSE: 2000 PPM **SEX:** Female **DISP:** Natural Death

DAY ON TEST: HISTO:

**OBSERVATIONS** 

Unspecified Multiple Organs Nos PRIMARY CAUSE OF DEATH

Lymphoma, Histiocytic-Malignant Type

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_025	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Kidney		Lymphoma, Lymphocytic-Malignant Type		
Lung		Pneumonia, Interstitial Chronic		
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**TRT#:** 1 **ANIMAL ID:** 1\_026

DOSE: 2000 PPM

**SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

**OBSERVATIONS** 

Uterus **Endometrial Gland**  Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_027	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Intestine Small	Peyers Patch	Lymphoma, Mixed-Malignant Type		
Lung		Pneumonia, Interstitial Chronic		
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_028	TRT#: 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Brain	Meninges	Lymphocytic Inflammatory Infiltrate		
Liver		Hepatocellular Carcinoma		
Lung		Pneumonia, Interstitial Chronic		
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

Final Dana M/Fable (NA

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1 029	TRT#: 1	SEX: Female	DAY ON TEST:	
711111712 15. 1_023	<b>DOSE</b> : 2000 PPM	DISP: Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Liver		Focal Cellular Change		
		Hepatocellular Adenoma		
	Hepatocytes	Necrosis, Focal		
Lung		Pneumonia, Interstitial Chronic		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3	3F1
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ANIMAL ID: 1_030	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Intestine Small	Peyers Patch	Hyperplasia, Lymphoid		
Liver		Inflammation, Chronic Focal		
Pancreas	Acinus	Atrophy, Focal		
	Duct Nos	Cyst, Multiple		
		Inflammation, Granulomatous		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_031	<b>TRT#</b> : 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Stomach	Submucosa	Inflammation, Acute Focal		
Uterus	Cervix Uteri	Fibroma		
	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_032	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Unspecified	Multiple Organs Nos	Lymphoma, Mixed-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH				

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

l no. 9

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_033	<b>TRT#:</b> 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Intestine Large	Colon	Nematodiasis		
Unspecified	Multiple Organs Nos	Lymphoma, Mixed-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_034	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Adrenal gland		Pheochromocytoma		
Liver		Hepatocellular Carcinoma		
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_035	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
	<b>DOSE.</b> 2000 PPW	DISP. Scheduled Sachlice	пізто.	
OBSERVATIONS				
Adrenal gland	Zona Glomerulosa	Cytoplasmic Vacuolization		
Lung		Alveolar/Bronchiolar Adenoma		
		Pneumonia, Interstitial Chronic		
Uterus		Fibroma		
	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_036	TRT#: 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Adrenal gland	Zona Fasciculata	Focal Cellular Change		
Liver		Hepatocellular Adenoma		
Unspecified	Shoulder	Fibrosarcoma		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_037	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

**Test Type:** Long-Term **Route:** Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_038	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH				

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dags M/F. NA / NA

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

<b>ANIMAL ID:</b> 1_039	TRT#: 1  DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:
OBSERVATIONS			
Lung		Pneumonia, Interstitial Chronic	
Ovary		Cyst, Hemorrhagic	
Uterus	Endometrial Gland	Hyperplasia, Cystic	

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_040	<b>TRT#:</b> 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Pituitary gland		Chromophobe Adenoma		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

**CAS Number:** 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Route: Dosed-Feed

PRIMARY CAUSE OF DEATH

Test Type: Long-Term

**ANIMAL ID:** 1\_041

Species/Strain: Mouse/B6C3F1

TRT#: 1

DOSE: 2000 PPM

**SEX:** Female

HISTO:

**OBSERVATIONS** 

Heart Myocardium Nos

Pigmentation, Nos

**DISP:** Natural Death

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_042	TRT#: 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Thyroid		Cyst, Follicular Nos		
Unspecified	Multiple Organs Nos	Lymphoma, Mixed-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 1\_043 **TRT#:** 1

DOSE: 2000 PPM

**SEX:** Female

DISP: Scheduled Sacrifice

DAY ON TEST: HISTO:

піз

OBSERVATIONS

Uterus Endometrial Gland

Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_044	<b>TRT#:</b> 1	SEX: Female	DAY ON TEST:
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:
OBSERVATIONS			
Liver		Hepatocellular Adenoma	
Uterus	Endometrial Gland	Hyperplasia, Cystic	
	Cervix Uteri	Lymphoma, Histiocytic-Malignant Type	
PRIMARY CAUSE OF DEATH	-		

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

**ANIMAL ID:** 1\_045 **TRT#:** 1

DOSE: 2000 PPM

**SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

OBSERVATIONS

Thyroid Cyst, Follicular Nos Uterus Endometrial Gland Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_046	TRT#: 1	SEX: Female	DAY ON TEST:	
	DOSE: 2000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Intestine Large	Colon	Nematodiasis		
Kidney	Glomerulus	Amyloidosis		
Unspecified	Multiple Organs Nos	Lymphoma, Mixed-Malignant Type		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 1_047	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Ovary		Cyst, Follicular Nos		
Thyroid		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

**ANIMAL ID:** 1\_048 **TRT#**: 1 **SEX:** Female **DAY ON TEST:** DOSE: 2000 PPM **DISP:** Scheduled Sacrifice HISTO: **OBSERVATIONS** Liver Inflammation, Acute/Chronic Alveolar/Bronchiolar Adenoma Lung Uterus **Endometrial Gland** Hyperplasia, Cystic PRIMARY CAUSE OF DEATH

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 1\_049 **TRT#:** 1

DOSE: 2000 PPM

**SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

OBSERVATIONS

Uterus Endometrial Gland

Cyst, Multiple

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 1_050	TRT#: 1 DOSE: 2000 PPM	SEX: Female DISP: Natural Death	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Hemangiosarcoma, Metastatic		
		Hyperplasia, Alveolar Epithelium		
	Bronchiole	Hyperplasia, Nos		
Lymph node	Mandibular Lymph Node	Hemangiosarcoma, Metastatic		
Unspecified	Multiple Organs Nos	Hemangiosarcoma		
Uterus	Endometrial Gland	Cyst, Multiple		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9 CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**TRT#:** 2 **ANIMAL ID:** 2\_002

DOSE: 1000 PPM

**SEX:** Female **DISP:** Scheduled Sacrifice

HISTO:

**OBSERVATIONS** 

Uterus **Endometrial Gland**  Hyperplasia, Cystic

Test Type: Long-Term Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_003	<b>TRT#</b> : 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	DISP: Natural Death	HISTO:	
OBSERVATIONS				
Liver		Hepatocellular Carcinoma		
Unspecified	Multiple Organs Nos	Lymphoma, Lymphocytic-Malignant Ty	ре	
Uterus		Endometrial Stromal Polyp		
PRIMARY CAUSE OF DEATH	<u>-</u>			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2 004	TRT#: 2	SEX: Female	DAY ON TEST:
ANNIAL ID. 2_004	DOSE: 1000 PPM	DISP: Scheduled Sacrifice	HISTO:
OBSERVATIONS			
Intestine Large	Colon	Nematodiasis	
Lymph node		Lymphoma, Histiocytic-Malignant Type	
Uterus	Endometrial Gland	Hyperplasia, Cystic	
PRIMARY CAUSE OF DEATH	-		

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_005	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:
OBSERVATIONS			
Unspecified	Multiple Organs Nos	Lymphoma, Lymphocytic-Malignant Type	
Uterus	Endometrial Gland	Hyperplasia, Cystic	
PRIMARY CAUSE OF DEATH	-		

Species/Strain: Mouse/B6C3F1

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Type: Long-Term

Route: Dosed-Feed

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_006	<b>TRT#:</b> 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	DISP: Natural Death	HISTO:	
OBSERVATIONS				
Liver	Hepatocytes	Necrosis, Focal		
Unspecified	Multiple Organs Nos	Lymphoma, Mixed-Malignant Type		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_007	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Ovary		Granuloma, Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_008	TRT#: 2 DOSE: 1000 PPM	SEX: Female  DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
	DOSE. 1000 PPINI	DISP. Scheduled Sachlice	пізто.	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Pancreas	Acinus	Atrophy, Nos		
	Duct Nos	Cyst, Multiple		
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_009	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Inflammation, Interstitial		
Unspecified	Multiple Organs Nos	Lymphoma, Lymphocytic-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

**CAS Number:** 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2 010	<b>TRT#</b> : 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	DISP: Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Mammary gland		Acinar-Cell Carcinoma		
Unspecified	Multiple Organs Nos	Lymphoma, Mixed-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

**CAS Number:** 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_011	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 2_012	TRT#: 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	DISP: Natural Death	HISTO:	
OBSERVATIONS				
Adrenal gland	Cortex Nos	Hemorrhage		
Kidney	Glomerulus	Amyloidosis		
	Capsule	Glomerulosclerosis, Nos		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_013	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Liver		Hepatocellular Carcinoma		
Lung		Hemorrhage		
		Pneumonia, Interstitial Chronic		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

**CAS Number:** 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

<b>ANIMAL ID:</b> 2_014	<b>TRT#:</b> 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Ovary		Cyst, Follicular Nos		
Skin		Granuloma, Foreign Body		
Spleen		Hyperplasia, Reticulum Cell		
Uterus		Angiectasis		
	Endometrial Gland	Hyperplasia, Cystic		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_015	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Intestine Small	Peyers Patch	Hyperplasia, Lymphoid		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	_			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9 CAS Number: 5160-02-1 Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 2\_016 **TRT#:** 2

DOSE: 1000 PPM

**SEX:** Female

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Uterus Endometrial Gland

Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_017	<b>TRT#:</b> 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Time Report Requested: 14:00:31

Date Report Requested: 10/26/2014

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_018	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:
OBSERVATIONS			
Kidney		Tubular-Cell Adenocarcinoma	
Liver		Inflammation, Acute Focal	
PRIMARY CAUSE OF DEATH	-		

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

<b>ANIMAL ID:</b> 2_019	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Uterus	Endometrial Gland	Cyst, Multiple		

**Test Type:** Long-Term **Route:** Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_020	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Cyst, Multiple		
PRIMARY CALISE OF DEATH	_			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_021	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST:	
			HISTO:	
OBSERVATIONS				
Liver		Hepatocellular Adenoma		
Pancreas	Acinus	Atrophy, Nos		
		Cystic Ducts		
Uterus	Endometrial Gland	Cyst, Multiple		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_023	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Hyperplasia, Alveolar Epithelium		
	Bronchiole	Hyperplasia, Nos		
Pituitary gland		Hyperplasia, Chromophobe Cell		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_024	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Uterus	Endometrial Gland	Hyperplasia, Cystic		
Vagina		Perivasculitis		

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

**ANIMAL ID:** 2\_025 **TRT#:** 2 **DOSE:** 1000 PPM

SEX: Female

DISP: Scheduled Sacrifice

HISTO:

OBSERVATIONS

Ovary
Unspecified Multiple Organs Nos
Uterus Endometrial Gland

Cyst, Follicular Nos Hemangiosarcoma Cyst, Multiple

PRIMARY CAUSE OF DEATH

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_026	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Liver		Cytoplasmic Change, Basophilic		
Lung		Pneumonia, Interstitial Chronic		
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_027	TRT#: 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	DISP: Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Adrenal gland	Zona Fasciculata	Inflammation, Acute/Chronic		
Liver		Cytoplasmic Change, Basophilic		
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type		
Uterus	Endometrium	Inflammation, Acute/Chronic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

CAS Number: 5160-02-1

Test Compound: D & C red no. 9

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_028	<b>TRT#:</b> 2	SEX: Female	DAY ON TEST:
	DOSE: 1000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:
OBSERVATIONS			
Liver	Bile Duct	Dilatation, Nos	
	Hepatocytes	Necrosis, Focal	
Lung	Bronchus	Lymphocytic Inflammatory Infiltrate	
Pituitary gland		Hyperplasia, Chromophobe Cell	
Uterus	Endometrial Gland	Hyperplasia, Cystic	
PRIMARY CAUSE OF DEATH	-		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_029	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Moribund Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Unspecified	Multiple Organs Nos	Lymphoma, Lymphocytic-Malignant Type		
Uterus	Endometrial Gland	Cyst, Multiple		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9 CAS Number: 5160-02-1

Time Report Requested: 14:00:31

Date Report Requested: 10/26/2014

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 2_030	TRT#: 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	DISP: Natural Death	HISTO:	
OBSERVATIONS				
Intestine Large	Colon	Nematodiasis		
Unspecified	Multiple Organs Nos	Leukocytosis, Neutrophilic		
	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type		
Uterus	Endometrial Gland	Cyst, Multiple		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

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Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 2_031	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Natural Death	DAY ON TEST: HISTO:
OBSERVATIONS			
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type	
Uterus	Endometrial Gland	Cyst, Multiple	
PRIMARY CAUSE OF DEATH	-		

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 2_032	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Ovary		Granulosa-Cell Tumor		
Pituitary gland		Hyperplasia, Chromophobe Cell		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_033	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Natural Death	DAY ON TEST: HISTO:	
OBSERVATIONS				
Unspecified	Abdominal Wall Nos	Fibrosarcoma		
	Multiple Organs Nos	Fibrosarcoma, Metastatic		
PRIMARY CAUSE OF DEATH	-			

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_034	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST:	
			HISTO:	
OBSERVATIONS				
Liver	Hepatocytes	Degeneration, Nos		
		Lymphocytic Inflammatory Infiltrate		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9 CAS Number: 5160-02-1 Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

**ANIMAL ID:** 2\_035 **TRT#:** 2

DOSE: 1000 PPM

**Endometrial Gland** 

**SEX:** Female

**DISP:** Scheduled Sacrifice

DAY ON TEST: HISTO:

**OBSERVATIONS** 

Liver Pituitary gland

Uterus

Cyst, Nos

Hyperplasia, Chromophobe Cell

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

**CAS Number:** 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_036	<b>TRT#:</b> 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	DISP: Natural Death	HISTO:	
OBSERVATIONS				
Ovary		Cyst, Follicular Nos		
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Typ	e	
Uterus	Endometrial Gland	Cyst, Multiple		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strai	n: Mouse/B6C3F1
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ANIMAL ID: 2_037	<b>TRT#:</b> 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Pancreas	Duct Nos	Cyst, Multiple		
Unspecified	Mediastinum Nos	Lymphoma, Histiocytic-Malignant Type		
Uterus		Dilatation, Nos		
	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_038	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Pituitary gland		Hyperplasia, Chromophobe Cell		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_039	TRT#: 2	SEX: Female	DAY ON TEST:
	DOSE: 1000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:
OBSERVATIONS			
Lung		Alveolar/Bronchiolar Adenoma	
Uterus	Endometrial Gland	Hyperplasia, Cystic	
PRIMARY CAUSE OF DEATH	-		

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**TRT#:** 2 **ANIMAL ID: 2\_040** 

DOSE: 1000 PPM

**SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

**OBSERVATIONS** 

Uterus **Endometrial Gland**  Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 2_041	<b>TRT#:</b> 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Route: Dosed-Feed
Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 2\_042 **TRT#:** 2

DOSE: 1000 PPM

**SEX:** Female

**DISP:** Scheduled Sacrifice

DAY ON TEST: HISTO:

OBSERVATIONS

Uterus Endometrial Gland

Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_043	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	_			

Test Type: Long-Term Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 2_044	<b>TRT#:</b> 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Intestine Small	Mesentery Nos	Hyperplasia, Lymphoid		
Liver		Regeneration, Nodular		
Pituitary gland		Chromophobe Adenoma		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/	Strain:	Mouse/B6C3F1	

<b>ANIMAL ID:</b> 2_045	TRT#: 2 DOSE: 1000 PPM	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:
OBSERVATIONS			
Lymph node	Mesenteric Lymph Node	Depletion, Lymphoid	
Ovary		Papillary Cystadenoma, Nos	
Pancreas	Acinus	Atrophy, Diffuse	
		Cystic Ducts	
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type	
Uterus	Endometrial Gland	Hyperplasia, Cystic	
PRIMARY CAUSE OF DEATH	-		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

9

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 2_046	<b>TRT#:</b> 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	DISP: Natural Death	HISTO:	
OBSERVATIONS				
Ovary		Cyst, Follicular Nos		
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type	e	
Uterus	Endometrial Gland	Cyst, Multiple		

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

ANIMAL ID: 2\_047 TRT#: 2 SEX: Female DAY ON TEST:

DOSE: 1000 PPM DISP: Scheduled Sacrifice HISTO:

**OBSERVATIONS** 

Ovary Cyst, Follicular Nos
Uterus Endometrial Gland Hyperplasia, Cystic

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 2\_048 **TRT#:** 2

DOSE: 1000 PPM

**SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

OBSERVATIONS

Uterus Endometrial Gland

Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2 049	TRT#: 2	SEX: Female	DAY ON TEST:	
7.1.1.1.1.1.2.1.2.1.2.1.0	DOSE: 1000 PPM	DISP: Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Liver		Inflammation, Acute/Chronic		
Lung		Inflammation, Acute/Chronic		
Spleen		Hyperplasia, Lymphoid		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 2_050	<b>TRT#</b> : 2	SEX: Female	DAY ON TEST:	
	DOSE: 1000 PPM	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Adrenal gland	Cortex Nos	Cyst, Nos		
Lung		Inflammation, Interstitial		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_001	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_002	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Adrenal gland	Cortex Nos	Focal Cellular Change		
Liver		Inflammation, Acute Focal		
Uterus		Adenocarcinoma, Nos		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Time Report Requested: 14:00:31

Date Report Requested: 10/26/2014

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_003	TRT#: 3 DOSE: 0	SEX: Female DISP: Natural Death	DAY ON TEST: HISTO:	
OBSERVATIONS	<b>DOCE.</b> 0	Dioi . Natural Death	THOTO:	
Brain	Hypothalamus Nos	Atrophy, Pressure		
Lymph node	Mandibular Lymph Node	Cyst, Hemorrhagic		
Mammary gland		Cyst, Nos		
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 3 004	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	DISP: Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Lung		Hyperplasia, Alveolar Epithelium		
	Bronchiole	Hyperplasia, Nos		
Ovary		Cyst, Follicular Nos		
Uterus		Leiomyoma		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_005	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Lung		Hyperplasia, Alveolar Epithelium		
	Bronchiole	Hyperplasia, Nos		
Thymus	Medulla	Hyperplasia, Epithelial		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3 006	<b>TRT#:</b> 3	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
	DOSE: 0			
OBSERVATIONS				
Intestine Large	Colon	Nematodiasis		
Unspecified	Multiple Organs Nos	Hyperplasia, Lymphoid		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

**CAS Number:** 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

**ANIMAL ID:** 3\_007 **TRT#:** 3 **DOSE:** 0

**SEX:** Female

DAY ON TEST: HISTO:

OBSERVATIONS

PRIMARY CAUSE OF DEATH

Uterus Endometrial Gland

Hyperplasia, Cystic

**DISP:** Scheduled Sacrifice

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

	DOSE: 0
ANIMAL ID: 3_008	<b>TRT#:</b> 3

**SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

**OBSERVATIONS** 

Tubule Regeneration, Nos Kidney **Endometrial Gland** Hyperplasia, Cystic Uterus

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 3\_009 **TRT#:** 3 **DOSE:** 0

**SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

OBSERVATIONS

Uterus Endometrial Gland

Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9 CAS Number: 5160-02-1 Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

**ANIMAL ID:** 3\_010 **TRT#:** 3 **DOSE:** 0

SEX: Female
DISP: Natural Death

HISTO:

OBSERVATIONS

Unspecified PRIMARY CAUSE OF DEATH

Sarcoma, Nos

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_011	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Lung		Hyperplasia, Alveolar Epithelium		
	Bronchiole	Hyperplasia, Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_012	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:
OBSERVATIONS			
Kidney	Tubule	Regeneration, Nos	
Ovary	Mesovarium	Lymphocytic Inflammatory Infiltrate	
Uterus	Endometrial Gland	Hyperplasia, Cystic	
PRIMARY CAUSE OF DEATH	-		

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 3_013	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:
	DOSE: 0	<b>DISP:</b> Scheduled Sacrifice	HISTO:
OBSERVATIONS			
Adrenal gland	Cortex Nos	Focal Cellular Change	
Eye	Lacrimal Gland	Inflammation, Chronic Cystic	
Lung		Pneumonia, Interstitial Chronic	
Ovary		Cyst, Corpus Luteum	
Pituitary gland		Hyperplasia, Focal	
Spleen		Hemangiosarcoma	
Unspecified	Neck	Hemangiosarcoma	
Uterus	Endometrial Gland	Cyst, Multiple	
PRIMARY CAUSE OF DEATH	-		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

AAURAA IB		0=V	DAY 611 TT 6T	
ANIMAL ID: 3_014	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	DISP: Natural Death	HISTO:	
OBSERVATIONS				
Ovary		Cyst, Corpus Hemorrhagicum		
Pituitary gland		Chromophobe Adenoma		
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Route: Dosed-Feed

PRIMARY CAUSE OF DEATH

Test Type: Long-Term

**ANIMAL ID:** 3\_015

Species/Strain: Mouse/B6C3F1

**TRT#:** 3 **DOSE**: 0 **SEX:** Female

**DISP:** Moribund Sacrifice

DAY ON TEST: HISTO:

**OBSERVATIONS** 

Unspecified Multiple Organs Nos Lymphoma, Lymphocytic-Malignant Type

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_016	TRT#: 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Liver		Inflammation, Acute Focal		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_017	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_018	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Liver		Hepatocellular Carcinoma		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 3 019	TRT#: 3	SEX: Female	DAY ON TEST:	
ANNIAE 10. 0_019	DOSE: 0	DISP: Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Ovary		Cyst, Corpus Luteum		
Spleen	Red Pulp	Histiocytosis		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_020	TRT#: 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Liver		Hepatocellular Carcinoma		
Ovary	Mesovarium	Lymphocytic Inflammatory Infiltrate		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

ANIMAL ID: 3_021	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:
OBSERVATIONS			

Eye

Uterus

Lacrimal Gland Adenoma, Nos
Endometrial Gland Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

ANIMAL ID: 3_022	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:
OBSERVATIONS			

ОВ

Intestine Large Colon Nematodiasis Lung Perivasculitis Uterus **Endometrial Gland** Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 3_023	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Adrenal gland	Medulla	Hyperplasia, Focal		
Intestine Large	Colon	Nematodiasis		
Liver		Hemangiosarcoma		
Lung		Pneumonia, Interstitial Chronic		
Thymus		Hyperplasia, Lymphoid		
Thyroid		Cyst, Follicular Nos		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_024	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Adrenal gland		Cortical Carcinoma		
Ovary		Cyst, Follicular Nos		
Unspecified	Multiple Organs Nos	Lymphoma, Histiocytic-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_025	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				-
Liver		Hepatocellular Carcinoma		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_026	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	DISP: Natural Death	HISTO:	
OBSERVATIONS				
Adrenal gland		Squamous Cell Carcinoma, Metastatic		
Bone marrow		Hyperplasia, Granulocytic		
Lung		Squamous Cell Carcinoma, Metastatic		
Unspecified	Leg	Squamous Cell Carcinoma		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

**TRT#:** 3 **ANIMAL ID:** 3\_027 DOSE: 0

**Endometrial Gland** 

**SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

**OBSERVATIONS** 

Lung Spleen Uterus Pneumonia, Interstitial Chronic Histiocytosis

Hyperplasia, Cystic

PRIMARY CAUSE OF DEATH

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_028	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Kidney	Tubule	Dilatation, Nos		
Liver		Hepatocellular Adenoma		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

Species/Strain: Mouse/B6C3F1

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_029	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	DISP: Scheduled Sacrifice HISTO:	HISTO:	
OBSERVATIONS				
Adrenal gland	Cortex Nos	Cyst, Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

Time Report Requested: 14:0

First Dose M/F: NA / NA

Lab: NA

DAY ON TEST:

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 3\_030 **TRT#:** 3 **DOSE:** 0

SEX: Female
DISP: Natural Death

HISTO:

OBSERVATIONS

Unspecified Multiple Organs Nos

Lymphoma, Lymphocytic-Malignant Type

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 3_031	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_032	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Alveolar/Bronchiolar Adenoma		
		Histiocytosis		
		Hyperplasia, Alveolar Epithelium		
	Bronchiole	Hyperplasia, Nos		
		Pneumonia, Interstitial Chronic		
Ovary		Cyst, Follicular Nos		
Thyroid		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_033	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Liver		Inflammation, Acute Focal		
Ovary		Cyst, Follicular Nos		
Thyroid		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_034	TRT#: 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Kidney	Tubule	Degeneration, Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH				

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

**CAS Number:** 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**ANIMAL ID:** 3\_035 **TRT#:** 3 **DOSE:** 0

**SEX:** Female

DISP: Scheduled Sacrifice

HISTO:

DAY ON TEST:

OBSERVATIONS

Uterus Endometrial Gland

Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**TRT#:** 3 **ANIMAL ID:** 3\_036 DOSE: 0 **SEX:** Female

**DISP:** Scheduled Sacrifice

HISTO:

DAY ON TEST:

**OBSERVATIONS** 

Lung Uterus **Endometrial Gland**  Alveolar/Bronchiolar Adenoma

Hyperplasia, Cystic

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_037	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Pituitary gland		Hyperplasia, Chromophobe Cell		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	<u>-</u>			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_038	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Mammary gland		Hyperplasia, Cystic		
Pituitary gland		Chromophobe Adenoma		
Unspecified	Multiple Organs Nos	Lymphoma, Mixed-Malignant Type		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Species/Strain: Mouse/B6C3F1

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_039	<b>TRT#:</b> 3	SEX: Female	DAY ON TEST:	
	DOSE: 0	<b>DISP:</b> Scheduled Sacrifice	HISTO:	
OBSERVATIONS				
Kidney	Tubule	Degeneration, Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

ANIMAL ID: 3_041	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Kidney		Hyperplasia, Lymphoid		
		Inflammation, Granulomatous Focal		
Liver		Hepatocellular Carcinoma		
Ovary		Cyst, Follicular Nos		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	_			

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Hyperplasia, Cystic

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

**ANIMAL ID:** 3\_042 **TRT#:** 3 **DOSE:** 0

**SEX:** Female **DISP:** Scheduled Sacrifice

DAY ON TEST: HISTO:

OBSERVATIONS

Test Type: Long-Term

Route: Dosed-Feed

Uterus Endometrial Gland
PRIMARY CAUSE OF DEATH -

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Test Type: Long-Term Route: Dosed-Feed

**ANIMAL ID:** 3\_043

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**TRT#:** 3 **DOSE**: 0 **SEX:** Female

**DISP:** Natural Death

DAY ON TEST: HISTO:

**OBSERVATIONS** 

Unspecified Multiple Organs Nos Lymphoma, Lymphocytic-Malignant Type

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**TRT#:** 3 **ANIMAL ID:** 3\_044 **DOSE**: 0 **SEX:** Female **DISP:** Natural Death

HISTO:

DAY ON TEST:

**OBSERVATIONS** Unspecified

Multiple Organs Nos

Lymphoma, Histiocytic-Malignant Type

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

Test Type: Long-Term

Route: Dosed-Feed

**ANIMAL ID:** 3\_045 **TRT#:** 3 **DOSE:** 0

**SEX:** Female

DISP: Scheduled Sacrifice HI

HISTO:

DAY ON TEST:

OBSERVATIONS
Unspecified

Multiple Organs Nos

Lymphoma, Mixed-Malignant Type

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014

Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

ANIMAL ID: 3_046	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Lung		Pneumonia, Interstitial Chronic		
Spleen		Lymphoma, Histiocytic-Malignant Type		
Thyroid		Cyst, Follicular Nos		

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

PRIMARY CAUSE OF DEATH

**TRT#:** 3 **ANIMAL ID:** 3\_047 **DOSE**: 0 **SEX:** Female

**DISP:** Natural Death

DAY ON TEST: HISTO:

**OBSERVATIONS** 

Unspecified Multiple Organs Nos Lymphoma, Lymphocytic-Malignant Type

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term
Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 3_048	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST:	
			HISTO:	
OBSERVATIONS				
Adrenal gland	Zona Fasciculata	Cytomegaly		
Liver		Inflammation, Granulomatous Focal		
Mammary gland		Hyperplasia, Cystic		
Ovary		Cyst, Follicular Nos		
Pituitary gland		Hyperplasia, Chromophobe Cell		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

**Test Type:** Long-Term **Route:** Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA

Test Compound: D & C red no. 9
CAS Number: 5160-02-1

Date Report Requested: 10/26/2014
Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

<b>ANIMAL ID:</b> 3_049	TRT#: 3 DOSE: 0	SEX: Female DISP: Scheduled Sacrifice	DAY ON TEST: HISTO:	
OBSERVATIONS				
Adrenal gland	Zona Reticularis	Focal Cellular Change		
Lung		Pneumonia, Interstitial Chronic		
Ovary		Cyst, Follicular Nos		
Pancreas		Cystic Ducts		
Uterus	Endometrial Gland	Hyperplasia, Cystic		
PRIMARY CAUSE OF DEATH	-			

<sup>\*</sup> PROTOCOL REQUIRED TISSUE

Test Type: Long-Term

Route: Dosed-Feed

P14: INDIVIDUAL ANIMAL PATHOLOGY DATA Test Compound: D & C red no. 9

CAS Number: 5160-02-1

Date Report Requested: 10/26/2014 Time Report Requested: 14:00:31

First Dose M/F: NA / NA

Lab: NA

Species/Strain: Mouse/B6C3F1

**TRT#:** 3 **ANIMAL ID:** 3\_050 DOSE: 0 **SEX:** Female

**DISP:** Natural Death

DAY ON TEST: HISTO:

**OBSERVATIONS** 

Unspecified Pelvis Nos Multiple Organs Nos

Osteosarcoma

Osteosarcoma, Metastatic

PRIMARY CAUSE OF DEATH

<sup>\*\*</sup> END OF REPORT \*\*